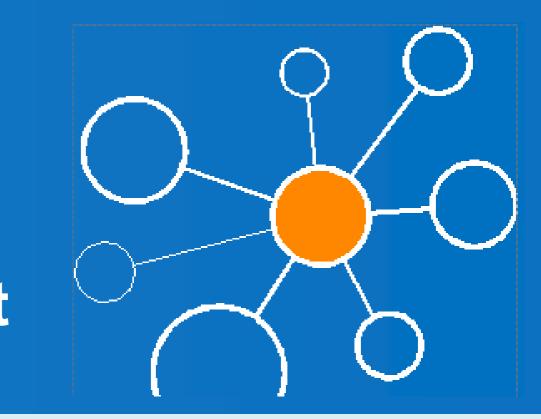


A Service Improvement Project Increasing TTOs Documenting Discontinued Medicines

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Introduction

Medicines reconciliation at discharge is an ever-growing process being undertaken in GP surgeries. Audits have been completed nationally on medicines reconciliation at discharge where up to 50% of TTOs (to-take-out) have an incomplete list of medicines documented at discharge (1).

A local audit has been carried out by a GP surgery comparing TTOs medicines to their list of regular medicines and found (2):

- 56% of TTO's from Gloucestershire Royal Hospital (GRH) had an incomplete list of medicines
- Only 7% of these TTOs documented if a medicine was intentionally stopped.

Methodology

- Data was collected on wards 4A and 4B, or in the dispensary.
- Drug charts were checked at discharge to check for discontinued medicines.
- Discontinued medicines were then cross-checked with the TTO. If the medicine was recorded, it was classed as a positive result.

Measures

- Outcome: the number of TTOs that document discontinued medicines
- Process: Pharmacy to document stopped medicines on the drug chart
- Balancing: The number of patients with a medicine discontinued

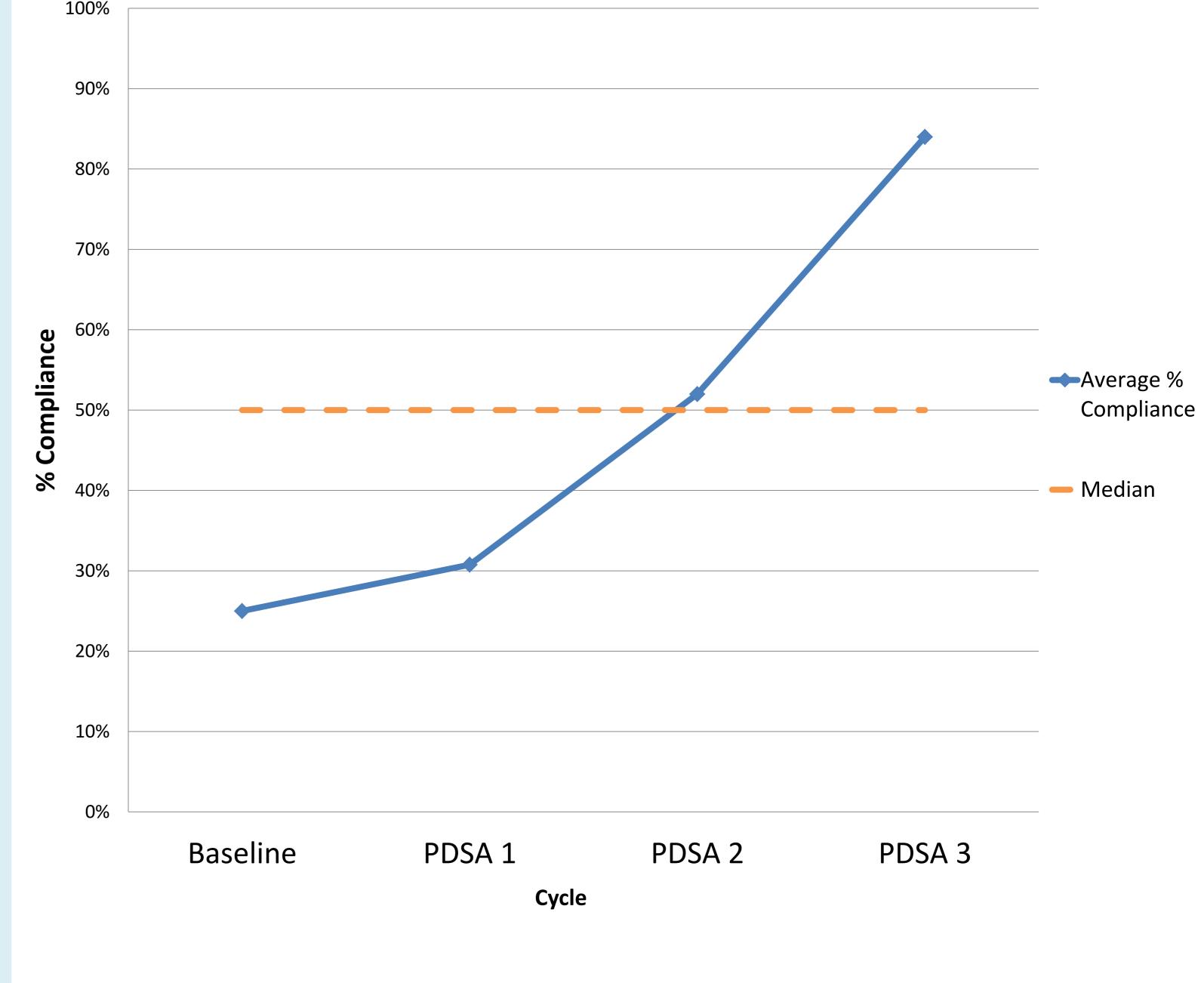
AIM: To increase the number of TTOs that document discontinued medicines by 20% over a time period of 6 months.

PDSA Cycles Pharmacists were to document any stopped medicine(s) on Cycle page 2 of the drug chart (there is a designated box). This can help prescribers when writing TTOs and can act as a prompt to include discontinued medicines. Cycle 2 involved giving prescriber education on the Cycle relevant wards, including junior and senior doctors, or any other relevant staff members. Cycle For the last cycle I produced a small poster to be attached to the ward computers. I chose to write a poem which can be seen below: A POEM FOR TTO'S When writing TTO's always check if any stopped medicines are included, Missing medicines may cause patients and GP's to become confused or deluded. With all the hard work the team have put into their stay, A medicine accidentally restarted could cause them to come back in another day. We appreciate that doctors are always short of time, On the TTO summary we only need a little line. So please check charts for any stopped medicines and take a quick look on page 2, We pharmacists are writing stopped medicines here which may help you too.

Results

Over 3 PDSA cycles, the average compliance for documented discontinued medicines increased from 26% (baseline data) to 82% (PDSA cycle 3). The graph can be seen below:

Overall Results showing the Average % Compliance for Documenting Discontinued Medicines on TTOs



Discussion/Future Work

Overall the results have been very successful, where I think the poem has been the most effective cycle. As we are developing our new electronic prescribing system, I would like to investigate this further for future cycles, to see if there are alternate ways to make it easier and more compliant to documenting discontinued medicines.

#TheGSQIAWay

References

(1) Petty D, Antioniou S. Planning for Discharge: The Next Steps in Medicines Reconciliation. (2010). Available: https://www.;pharmaceutical-journal.com/opinion/comment/planning-for-discharge-the-next-step-for-medicines-reconciliation/11010072.article?firstPass=false.
(2) Doe, E. A Service Improvement Project to improve Discharge Information between Gloucestershire Hospitals and GP Practices. "Pre-registration project". Gloucestershire Royal Hospitals NHS Foundation Trust; March 2018.